Under the Paperwork PATE	teduction Act of 190	6, no persone en	o required to reach) / xonst to	V.S. Petent e I & collection o	Apprond Tradem	oved for a	He thr	ough 7/31/20 DEPARTMEN	PTO/SB/06 (06. OM8 0651 NT OF COMM	
PATE	NT APPLICAT	TON FEE D		TIOI	V RECOR	D			alton or Dock	MH maini	
APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY								OR	OTI SMA	HER THAN ALL ENTITY	
FOR BASIC FEE	NUMBER FE	ED N	UMBER EXTRA		RATE (1)	EE	(3)				
(37 CFR 1.16(a), (b), or (c))	N/A		. N/A		NA		.00		RATE (\$)		
(37 CFR 1 16(N, (1), or (m)) EXAMINATION FEE	· N/A		N/A.		· N/A·	\$2	50	ì	N/A	300.00	
37 CFR 1.16(d, (p), or (q))	. NA .	1	N/A	7	NA	\$10				\$500	
TOTAL CLAMS 31 CFR 1.16(1))	min	# 20 =		7	X\$ 25				NIA	\$200	
NDEPENDENT CLAIMS		U8 3 e		\dashv	X100			OR	X\$50	-	
PPLICATION SIZE	If the specifical	on and drawing	s exceed 100	-	7,00	<u> </u>			X200	•	
is \$250 (\$125 for small entity) for each additional 50 sheets or traction thereof.									•		
ULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(3)					+180=	-	_		0.50		
The difference in column 1 is less than zero, enter "0" in column 2.						╃	_	L	+360=		
APPLICATION AS AMENDED - PART II					TOTAL			*	TOTAL		
5317 REI	Mumn 1) ELAIMS MAINING LETER INDMENT Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT		SMALL RATE (1)	ADOI TIONA FEE (\$		R	SMALL RATE (\$)	R THAN ENTITY ADDI- TIONAL FEE (8)	
Independent G7 CFR 1.16hij	/ Minus.	1 2		1 -	X\$ 25 .		OR	×	\$50		
AMENDMENT PREVIOUSLY EXTRA Total profer (1/40)) Minus 2 = Application Size Fee (37 CFR 1.16(s))					X100 _		OR	X	200		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)					+180=			_			
					OTAL		OR		360=		
	una 1)	(Column 2)	(Column 3)	4	DOLFEE		OR		TAL D'L FEE		
REMA	AIMS AINING TER DMENT:	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	Γ.	RATE (\$)	ADDI- TIONAL FEE (\$)	7	F	ATE (\$)	ADDI- TIONAL	
O7 CFR LIGIU	Minus.	• •	*	15	S 25 .	<u> </u>	7	-	FG -	FEE (\$)	
DT OFR LIGHT	Minus	***	3		(100		OR.	XS			
Application Size Fee (37							OR	1~	00		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))					180=		OR	+3	60±		
ll blog and				AC	TAL D'L FEE		OR	701	AL		
If the entry in column 1 is if the "Highest Number Priff the "Highest Number Priff the "Highest Number Prelication of Information is to process) an application to the process) an application.	eviously Paid For II	Y THIS SPACE IS	i less than 20, en less than 3, ente	nter "20 or "3".	ـــ	appropria	le box in a		L FEE		

The Tighest Number Previously Peld For (Total or Independent) is the highest number toung in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Depertment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1460, Alexandria, VA 22313-1450.